

**Discharge Orders  
Dr. Lansford**



QR: Online current  
order sets

1. **Discharge to:** (Patient has met established discharge criteria)  
 Home    Other

2. **Diet:** (Check all that apply)  
 General Diet    As tolerated    Tonsillectomy diet (see patient instruction sheet)  
 Other \_\_\_\_\_

**3. Activity:**

- Take precautions not to fall. Avoid steamy/slippery showers and walking in the dark or in cluttered walkways.
- Activity should be neither sedentary nor highly active. Getting up and walking frequently is important.
- The patient may drive when all these criteria are met:
  1. Greater than 24 hrs have passed since the end of surgery **and**
  2. Greater than 4 hours have passed since taking any narcotic/opioid or sedating medication **and**
  3. The patient can turn the head to check the blind spot, etc. **and**
  4. The patient and family members judge the patient to be safe to drive.
- No lifting over 15 pounds and no strenuous activity for 2 weeks.
- Other \_\_\_\_\_

**4. Wound Care:**

- Teach patient/family drain care and how to use a drain diary (Empty and record drainage **3** times a day).

5. **Instruction sheets:** (may be found at <https://www.doctorlansford.com/post-op-instructions>) or use the QR code.



QR: Online index of  
current post-op  
instructions

- Abscess drained through the mouth • Form “PO-T”
- Abscess drained through an incision • Form “PO-S”
- Ear tube placed in the O.R. post-operative • Form “PO-B”
- Endoscopy post-operative • Form PO-C
- Myringoplasty/Tympanoplasty • Form “PO-R”
- Neck-face surgery post-operative • Form “PO-E”
- Nose surgery (internal + external) post-operative • Form “PO-F”
- Nose surgery (internal) post-operative • Form “PO-G”
- Osia implant surgery post-operative • Form “PO-H”
- Parathyroid surgery post-operative • Form “PO-I”
- Parotid surgery post-operative • Form PO-J”
- Skin surgery post-operative • Form “PO-K”
- Surgery general post-operative • Form “PO-L”
- Thyroid surgery post-operative • Form “PO-P”
- Tonsillectomy/adenoidectomy and ear tubes postoperative • Form “PO-M”
- Tonsillectomy/adenoidectomy post-operative • Form “PO-N”
- Other: \_\_\_\_\_

**6. Follow Up Appointments:**

Follow-up appointment in \_\_\_\_\_ days with  Dr. Lansford    Other: \_\_\_\_\_

- Include audiogram and tympanogram appointment prior to seeing the provider

**7. Discharge Medications:**

- See RCC Medication List for prior-to-admission medications
- Afrin (oxymetazoline) 2 sprays each nostril q30 minutes PRN epistaxis.

Amoxicillin - calculation

(low dose: 25 mg/kg•day x \_\_\_\_\_ kg = \_\_\_\_\_ mg/day)

(high dose: 50 mg/kg•day x \_\_\_\_\_ kg = \_\_\_\_\_ mg/day)

- amoxicillin  125 mg/5mL  200mg/5mL  250 mg/5 mL  400 mg/5 mL  200 mg tab  250 mg tab  500 mg tab  
Take (/give)  \_\_\_\_\_ mL  \_\_\_\_\_ tabs  
Frequency  BID  TID  
Duration: for  5 days  7 days  10 days. Dispense: #QS. No refill.
- amoxicillin/clavulanate  125 mg/5 mL  200mg/5 mL  250 mg/5 mL  400 mg/5 mL  
 200mg chewable tab  250mg tab  400 mg chewable tab  500mg tab  875 mg tab  1000 mg XR tab  
Take (/give)  \_\_\_\_\_ mL  \_\_\_\_\_ tabs  
Frequency:  BID  TID  
Duration: for  5 days  7 days  10 days. Dispense: #QS. No refill.
- cephalexin  125mg/5mL  250 mg/5mL  250 mg capsule  500 mg capsule  
(Pediatric: 25-50 mg/kg/day PO divided q6-8hr for 10 days; not to exceed 4 g/day)  
Take (/give)  \_\_\_\_\_ mL  one capsule  
Frequency:  BID  TID  QID  
Duration: for  5 days  7 days  10 days. Dispense: #QS. No refill.
- clindamycin  75mg/5mL  150 mg capsule  300 mg capsule  
(Pediatric: 7 mg/kg/dose TID for 10 days; not to exceed 300 mg/dose)  
Take (/give)  \_\_\_\_\_ mL  one capsule  
Frequency:  TID  QID  
Duration: for  5 days  7 days  10 days. Dispense: #QS. No refill.
- azithromycin suspension  100mg/5mL  200mg/5mL  250 mg tab  500 mg tab  
(Pediatric 10 mg/kg PO x 1 dose on Day 1 followed by 5 mg/kg on Days 2-5)  
Take (/give)  two tablets  \_\_\_\_\_ mL **on day #1**, and  one tablet  \_\_\_\_\_ mL **days 2-5**  
Frequency:  QD. Duration: 5 days. Dispense: #QS. No refill.
- ciprofloxacin ophthalmic gtts: 3 gtts,  each ear  right ear or  left ear BID for \_\_\_\_\_ days.  
Disp #5 mL. Refills: #3.  
 Do not start until one week prior to follow up appointment.
- sulfacetamide ophthalmic gtts: 3 gtts to  each ear  right ear  left ear BID for \_\_\_ days.  
Disp #5 mL. Refills: #3.  
 Do not start until one week prior to follow up appointment.
- acetaminophen  80 mg ODT  160 mg ODT  160 mg/5mL  500 mg/5mL  325 mg cap  500 mg cap  650 mg cap  
(Pediatric: 10-15 mg/kg/dose PO q4hr prn, not to exceed 75 mg/kg/day or 4g/day)  
Take (/give)  \_\_\_\_\_ mL  one tablet  
Frequency:  Q4hr prn pain. Disp:  # \_\_\_\_\_ mL  # \_\_\_\_\_ caps
- tramadol 50 mg tab. Take 1 PO q6hr prn moderate to severe pain. Disp #\_
- hydrocodone/acetaminophen elixir 7.5mg/325mg per 15mL.  
(Pediatric: max 0.135 mg/kg hydrocodone PO q4hr, not to exceed 90 mg acetaminophen/kg/day PO or 4 g acetaminophen per day)  
Take (/give)  \_\_\_\_\_ mL  
Frequency:  Q4hr prn pain. Dispense:  \_\_\_\_\_ mL  250mL  500mL No refills.
- oxycodone/acetaminophen  5mg/325mg/15 mL  5 mg/325mg tab

(Pediatric: 0.05-0.2 mg oxycodone/kg/dose q4hr, not to exceed 90 mg acetaminophen/kg/day PO or 4 g acetaminophen per day)

Take (/give)  \_\_\_\_\_ mL  one tablet

Frequency:  Q4hr prn pain. Dispense:  \_\_\_\_\_ mL  \_\_\_\_\_ tabs. No refills.

lorazepam 0.5 mg tabs. Take 1 PO Q8 hrs PRN anxiety, dispense #\_\_\_\_\_. No refills.

ondansetron  4 mg/5 mL  4 mg ODT. Take  \_\_\_\_\_ mL  1 tablet PO Q8hr prn nausea. Disp  \_\_\_\_\_ mL  
 #10 tablets, Refills: 3.

famotidine 20 mg PO BID for 30 days, dispense #60. No refills.

omeprazole 20 mg po qhs for 30 days, dispense #30. No refills.

bacitracin ointment. Apply a thin layer to exposed (not dressed) incision(s) and drain sites TID for  5 days  7 days.  
Dispense: #30g tube. Refills: #3.

bacitracin ophthalmic ointment. Apply a thin layer to incision(s) near the eye(s) TID for  5 days  7 days.  
Dispense: #3.5 g tube.  May substitute similar Refills: #3.

docusate 100 mg cap. Take 1 PO TID. Dispense #30, Refills: #3.

docusate liquid 50 mg/5 mL.

Age 3-5  2.5 mL  5 mL PO QD for 7 days. Disp # 50 mL, Refills: #3

Age 6-11  5 mL  10 mL PO QD for 7 days. Disp # 100 mL, Refills: #3

Age 12 and older  10 mL PO  QD  BID  TID for 7 days. Disp: #qs, Refills #3.

calcium carbonate 500 mg Take \_\_\_\_\_ tabs PO \_\_\_\_\_ times a day

Other medications:

Name:	Dose:	Frequency:	Name:	Dose:	Frequency:
-------	-------	------------	-------	-------	------------

### Discharge

Teach pt/family how to strip, empty, record output, and re-charge the drain(s).

Discontinue IV prior to discharge.

Discharge when the patient meets established criteria

DVT Prevention and Assessment teaching for patient and family before discharge

Signature: \_\_\_\_\_ M.D. Date: \_\_\_\_\_ Time: \_\_\_\_\_